

(When filled in)

25X1

Voucher No. 4726
19 May 1960

MEMORANDUM FOR: Chief, Finance Division

ATTENTION : Monetary Branch

SUBJECT : Disbursement by Treasury Check

1. It is kindly requested that a U. S. Treasury Check be drawn in favor of the company listed hereunder in the amount stated, which will be applicable to the contract or agreement shown. The contract number and invoice identification must appear on the check.

a. Check drawn in favor of: Edgerton, Germeshausen and Grier, Inc.
b. Amount: \$36,864.66
c. Contract Number: TE-2191
d. Invoice Number: 76 & 77
e. Check to be dated: 23 May 1960

2. Pertinent documentation in connection with the classified transaction which has not been included in accordance with Comptroller's Instruction No. 32 the Office of the Comptroller, DFD-ND/P.

3. The payment requested is based on progress made by the Contractor to date and should be processed against General Ledger Account No. 138 titled "Disbursement of Appropriated Funds Chargeable to Confidential Funds Allotments Awaiting DCI Certification." The allotment Symbol Applicable to this request is 0528-0060-5100 (07.0) and the amount is chargeable to General Ledger Account No. 601.0.

4. The check should be dated as stated in Paragraph 1 and mailed in the attached self-addressed envelope. If no envelope is attached the undersigned should be contacted on extension when payment is ready for disposition.

SIGNED

Authorized Accounting Officer

19 May 1960

PAID
62 228 897
MAY 24 1960S-E-C-R-E-T
(When filled in)

044069 MAY 24 1960

FOR PURCHASES OF SERVICES OTHER THAN PERSONAL

Use continuation sheet(s) if necessary

BU. VOU. NO. _____

U. S. _____
(Department, bureau, or establishment)

Voucher prepared at _____
(Give place and date)

Payee's Account No. _____ Discount Terms _____

TO Edgerton, Gerneshausen and Grier, Inc.
(Payee)

Las Vegas, Nevada
(Address)

PAID BY

Contract No. TE-2191

Date

Req. No.

Date

Invoice Rec'd.

Shipped from

to

Weight

Govt. B/L No.

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)	Quantity	UNIT PRICE		AMOUNT
				Cost	Per	
		Invoice No. 76 77				\$33,513.33 3,351.33
TOTAL						\$36,864.66

PAYMENT:

COMPLETE ☐
PARTIAL ☐
FINAL ☐
PROGRESS ☐
ADVANCE ☐

(PAYEE MUST NOT USE THIS SPACE)

DIFFERENCES _____

Amount verified; correct for

(Signature or initials) _____

STAT

† Approved for _____ = \$ _____

By _____

Title _____

Exchange rate _____ = \$1.00

Pursuant to authority vested in me, I certify that

th _____ ment.

†

(Date)

STAT

(Contracting Office)

DRM

THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE OR

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)

Paid by

Check No. _____ on Treasurer of the United States

Check No. _____ on _____
(Name of Bank)

Cash, \$ _____, on _____, 19 _____ Payee _____

* When used in foreign countries, insert name of currency of country in which used.

† If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign on the line below "Approved for \$ _____", and over his official title.

Per _____

Title _____

PUBLIC VOUCHER FOR PURCHASES AND SERVICES OTHER THAN PERSONAL

Use continuation sheet(s) if necessary

D. O. YOU. NO.

BU. VOU. NO. 76

U. S. _____ Contracting Officer
(Department, bureau, or establishment)

Voucher prepared at _____ (Give place and date)

Payee's Account No. _____ Discount Terms _____

TO Edgerton, Germeshausen & Grier, Inc.
(Payee)

PAID BY

DPD-3684-60

0000 1012

(Address)

Contract No. TE 2191
Shipped from

Date 4/26/57

Req. No.**Date**

Invoice Rec'd.

to Weight

Govt. B/L No.

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)	Quantity	UNIT PRICE		AMOUNT
				Cost	Per	
		Month ending 31 March 1960				
		Direct Labor				11,578.82
		Materials & Services				992.32
		Travel				9,404.18
		Freight & Express				2.45
		Other Direct Charges				307.63
		Burden				8,460.77
		G & A				<u>2,767.16</u>
				TOTAL		\$33,513.33

PAYMENT:

COMPLETE ☐

PARTIAL ☐

FINAL ☐

PROGRESS ☐

ADVANCE ☐

(PAYEE MUST NOT USE THIS SPACE)

DIFFERENCES

Amount verified; correct for
(Signature or initials)_____

STAT

† Approved for _____ = \$ _____

By _____

Title _____

Exchange rate 2.00 = \$1.00

Pursuant to authority vested in me, I certify that this voucher is correct and proper for payment.

† _____
(Authorized Certifying Officer) (Date)

THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE OR SERVICES SECURED WITHOUT WRITTEN AGREEMENT IN ANY FORM

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)

APR

Paid by

Check No. _____ on Treasurer of the United States

Check No. _____ on _____ (Name of Bank)

Cash. \$ _____, on _____, 19____ Payee _____

* When used in foreign countries, insert name of currency of country in which used.

† If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign on the line "Approved for \$ _____", and over his official title.

Per _____

Title_____

Standard Form No. 1035
7 GAO 5030
1035-104**Public Voucher for Purchases and
Services Other Than Personal**

CONTINUATION SHEET

U. S. _____ Contracting Officer _____ Sheet No. 1 of Bureau Voucher No. 76
(Department, bureau, or establishment)

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)	QUAN- TITY	UNIT PRICE		AMOUNT	
				Cost	Per		
		Direct Labor 11,578.82					
		Materials & Services 992.32					
		Travel 9,404.18					
		Freight & Express 2.45					
		Other Direct Charges 307.63					
		*Burden 8,460.77					
		Total Direct Costs					30,746.17
		G & A					
		Total Direct Costs @ 9%					2,767.16 ✓
							\$33,513.33 ✓
		*Burden:					
		March Non Premium Direct Labor 10,575.96 @ 80% \$2,767.16					

**PUBLIC VOUCHER FOR PURCHASES
SERVICES OTHER THAN PERSONAL**

D. O. VOU. NO. _____

Use continuation sheet(s) if necessary

BU. VOU. NO. 77

U. S. Contracting Officer
(Department, bureau, or establishment)

Voucher prepared at _____
(Give place and date)

Payee's Account No. _____ Discount Terms _____

TO Edgerton, Germeshausen & Grier, Inc.
(Payee)

(Address)

PAID BY <u>DPD-368560</u> <u>COM 1 2</u>
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Contract No. TE 2191 Date 4/26/57 Req. No. _____ Date _____ Invoice Rec'd. _____
Shipped from _____ to _____ Weight _____ Govt. B/L No. _____

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)	Quantity	UNIT PRICE		AMOUNT
				Cost	Per	
		Month ending 31 March 1960 Fixed Fee				\$3,351.33 ✓
				TOTAL		<u>\$3,351.33</u>

PAYMENT:		(PAYEE MUST NOT USE THIS SPACE)	
COMPLETE <input type="checkbox"/>		DIFFERENCES _____	
PARTIAL <input type="checkbox"/>		_____	
FINAL <input type="checkbox"/>		_____	
PROGRESS <input type="checkbox"/>		Amount verified; correct for <u>\$3,351.33</u>	
ADVANCE <input type="checkbox"/>		(Signature or initials) _____	
		STAT	

† Approved for _____ = \$ _____

By _____

Title _____

Exchange rate _____ = \$1.00

Pursuant to authority vested in me, I certify that this voucher is correct and proper for payment.

† _____ (Authorized Certifying Officer) (Date) _____

THE REVERSE OF THIS FORM MUST BE EXECUTED WHEN PURCHASES ARE MADE OR SERVICES SECURED WITHOUT WRITTEN AGREEMENT IN ANY FORM

ACCOUNTING CLASSIFICATION (Appropriation Symbol must be shown; other classification optional)

Paid by { Check No. _____ on Treasurer of the United States
Check No. _____ on _____ (Name of Bank)
Cash, \$ _____, on _____, 19 _____ Payee _____

* When used in foreign countries, insert name of currency of country in which used.

† If the ability to certify and authority to approve are combined in one person, one signature only is necessary; otherwise the approving officer will sign on the line below "Approved for \$ _____", and over his official title.

Per _____
Title _____

Standard Form No. 1035
7 GAO 5030
1035-104

Public Voucher for Purchases and Services Other Than Personal

CONTINUATION SHEET

U. S. _____ Contracting Officer _____ Sheet No. 1 of Bureau Voucher No. 77
(Department, bureau, or establishment)

No. and Date of Order	Date of Delivery or Service	ARTICLES OR SERVICES (Enter description, item number of contract or Federal supply schedule, and other information deemed necessary)	QUAN- TITY	UNIT PRICE		AMOUNT	
				Cost	Per		
		Costs thru March 1960				829,065.53	✓
		Fixed Fee Earned (10% of above)				32,906.55	✓
		Fixed Fee Previously Billed				29,555.22	✓
		Amount of this Voucher				\$ 3,351.33	✓
<p>"I certify that the Fixed Fee claimed is correct and just; and that it is proportionate to the progress made on the Contract."</p> <p>EDGERTON, GERMESHAUSEN & GRIER, INC.</p> <p>_____ Controller</p> <p>STAT</p>							